

ANTHEM BLUE CROSS

FREQUENTLY ASKED QUESTIONS

PLANS AND RATES INFORMATION

[WHO IS ANTHEM BLUE CROSS](#)

[ANTHEM BLUE CROSS PLANS](#)

[PLAN DOCUMENTS](#)

[PREMIUM RATES](#)

[EFFECTIVE DATE](#)

[SWITCHING FROM BLUE SHIELD AND SUTTER HEALTH PLUS](#)

CHOOSING A PLAN

[DIFFERENCES BETWEEN HMO AND PPO](#)

[HMO PLAN DEFINITION](#)

[HMO KEY FEATURES](#)

[ANTHEM SELECT HMO PLANS](#)

[PPO PLAN DEFINITION](#)

[PPO KEY FEATURES](#)

[ANTHEM PPO PLANS](#)

[DIFFERENCES BETWEEN ANTHEM'S SELECT AND CLASSIC PLANS](#)

[ANTHEM MEDICAL GROUPS AND HOSPITALS](#)

[HIGH DEDUCTIBLE HEALTH PLAN \(HDHP\) WITH HSA](#)

[HEALTH SAVINGS ACCOUNT \(HSA\) DEFINITION](#)

[ANTHEM HSA](#)

[MEDICARE ADVANTAGE PLAN DEFINITION](#)

[ANTHEM MEDICARE ADVANTAGE PLANS](#)

CHOOSING YOUR DOCTOR

[FINDING AN ANTHEM BLUE CROSS PROVIDER](#)

EMERGENCY CARE TRAVELLING OUTSIDE OF US

PRESCRIPTION DRUGS

MEMBER ID CARDS

ADDED BENEFITS

[GYM MEMBERSHIP DISCOUNTS](#)

[ONLINE TOOLS AND OTHER SERVICES](#)

NEED MORE INFORMATION?

[ON-SITE ANTHEM CONCIERGE](#)

[ANTHEM MEMBERSHIP SERVICES](#)

[CITY OF SAN JOSE ANTHEM MICROSITE](#)

[REACH OUT TO CITY OF SAN JOSE HR BENEFITS & RETIREMENT SERVICES](#)

[WHEN WILL MORE INFORMATION BE AVAILABLE?](#)

ANTHEM PLANS AND RATES INFORMATION

Who is Anthem Blue Cross?

Anthem (formerly Blue Cross of California) originated in 1937 and now covers over 40 million Americans across the country. In California, Anthem Blue Cross is the trade name of Blue Cross of California.

What plans will Anthem be providing in place of the current Sutter and Blue Shield plans?

The City of San José employees and retirees will have access to the following Anthem health benefit plan options:

- 2 Anthem Blue Cross HMO plans
 - \$20 Copay Select HMO
 - \$1500 Deductible Select HMO
- 3 Anthem Blue Cross PPO Plans
 - \$100 Deductible Select PPO
 - \$100 Deductible Classic PPO
 - \$2500 Deductible Classic PPO w/HSA
- 2 Medicare Advantage Plans
 - Medicare Advantage HMO
 - Medicare Advantage PPO

When will the Plan Documents be available?

Anthem is in the process of finalizing the Plan Summaries for the City. As soon as they are ready, they will be posted on the HR Benefits and Retirement Services web sites.

What are the premium rates for the plans?

The final rates are now available for employees on the HR Benefits web site under [Open Enrollment](#). Rates for retirees are available on the Retirement Services web site for both [Federated](#) and [Police and Fire](#) retirees.

When will the changes be effective?

The Anthem plans and rates will be effective January 1, 2020. You will be able to enroll in Anthem's plans during open enrollment: between October 21 and November 8, 2019 for employees and between November 1 and November 30, 2019 for retirees.

What do Blue Shield and Sutter Health Plus Members need to do?

During Open Enrollment all Sutter Health Plus and Blue Shield members will need to enroll in one of the plans available for 2020. If you do not enroll in a medical plan during Open Enrollment you will be automatically enrolled into the Anthem plan listed below based on your current health plan. These changes will be effective January 1, 2020:

- SHP HMO \$20 Copay will automatically be enrolled in the Anthem \$20 Copay Select HMO.
- SHP HMO \$1500 Deductible will automatically be enrolled in the Anthem \$1500 Deductible Select HMO.
- SHP \$2500/H.S.A. will automatically be enrolled in the Anthem \$1500 Deductible Select HMO. Important note: This Anthem plan is not HSA compatible.
- Blue Shield of California \$100 Deductible PPO will automatically be enrolled in the Anthem \$100 Deductible Select PPO plan.
- Blue Shield of California Medicare HMO **and** PPO will automatically be enrolled in the Anthem Medicare Advantage **PPO** plan.

CHOOSING A PLAN THAT'S RIGHT FOR YOU

What is the difference between HMO and PPO Plans?

The differences between HMO and PPO plans include plan costs, the size of the plan network, ability to see specialists, and coverage for out-of-network services.

Costs for HMO plans will be less, as premiums tend to be lower and there is no deductible. With an HMO you will need to select a primary care physician (PCP) and you will need a referral from the PCP if you want to see a specialist.

Costs for PPO plans will be higher, as premiums tend to be higher and there is a deductible. However, PPOs are more flexible in that you do not need to select a PCP and no referral is needed to see a specialist.

What is an HMO Plan?

A Health Maintenance Organization (HMO) plan gives you access to certain doctors and hospitals within its network. A network is made up of providers who have agreed to lower their rates for plan members and meet quality standards. But unlike PPO plans, care under an HMO plan is covered only if you see a provider within that HMO's network. There are also typically more restrictions for coverage than other plans, such as allowing only a certain number of visits, tests or treatments. With an HMO plan, out-of-network coverage is limited to emergencies; non-emergency services are not covered.

Some other key points about HMOs:

- You will be required to select a primary care physician (PCP), who will determine what treatment you need and coordinate your care.
- You may need a PCP referral to be covered when you see a specialist or have a special test done.

- If you opt to see a doctor outside of an HMO network, there is no coverage, meaning you will have to pay the entire cost of medical services.
- Premiums are generally lower for HMO plans, and there is usually no deductible.

Anthem Select HMO Plans

- Robust network of medical groups, hospitals and doctors within 22 key counties statewide.
- Access to over 27,000 **California** Select HMO doctors and specialists, more than 390 hospitals including Good Samaritan, and Santa Clara County Individual Practice Association (SCCIPA).
- Choice of two HMO plans:
 - \$20 Copay Select HMO
 - \$1500 Deductible Select HMO

What is a PPO Plan?

A Preferred Provider Organization (PPO) plan features a network of providers, and lets you see doctors both in and outside of the plan network, providing more flexibility when picking a doctor or hospital. Providers in the network agree to accept lower payments in exchange for access to patients. However, when you seek care from doctors outside of your plan network, you will usually pay more.

Here are some key features of a PPO:

- You can see a doctor or specialist without having to see a PCP first.
- You can see a doctor or go to a hospital outside the network and you may be covered. However, your benefits will be better if you stay in the PPO network.
- In-network providers offer lowest out-of-pocket costs; out-of-network providers have a higher cost.
- Premiums tend to be higher, and it's common for there to be a deductible.

Anthem PPO Plans

- Exceptional network of medical groups, hospitals, and doctors nation-wide.
- Anthem offers a Select PPO and two Classic PPOs:
 - \$100 Deductible Select PPO
 - \$100 Deductible Classic PPO
 - \$2500 Deductible Classic PPO (HDHP*) w/Health Savings Account (HSA**)

What is difference between Anthem's Select and Classic Plans?

City of San José is offering (2) Select HMO plans, (1) Select PPO plan and (2) Classic PPO plans. The Classic network is Anthem's largest network of providers and facilities and includes Sutter doctors In-Network.

Anthem's Select network is a narrow network of providers and facilities. For the Select HMO plans, Sutter doctors are not included in the network. For the Select PPO plan, Sutter doctors are not included In-Network; however, they are available Out of Network. If you would like to see a Sutter doctor in-network, you must choose one of the Classic PPO plans. Both of these networks include Santa Clara Individual Practice Association (SCCIPA) and Good Samaritan Hospital, among other preferred providers. Before choosing your plan, you should confirm in which network your desired providers participate.

Following is a partial list of local Medical Groups and Hospitals in Anthem's Select and Classic networks:

Medical Groups

[Affinity Medical Group](#)

[Alta Bates Medical Group](#)

[Asian American Medical Group](#)

[Dignity Health](#)

[Hill Physicians](#)

[Physicians Medical Group of San José](#)

[Physicians Medical Group of Santa Cruz](#)

[Santa Clara County IPA \(SCCIPA\)](#)

Hospitals

[Chinese Hospital](#)

[Dominican Santa Cruz](#)

[El Camino Hospital](#)

[Good Samaritan Hospital](#)

[Kentfield Hospital](#)

[Kentfield Rehabilitation & Specialty Hospital](#)

[Marin General Hospital](#)

[O'Connor Hospital](#)

[Regional Medical Center of San Jose](#)

[Sequoia Hospital](#)

[Seton Medical Center](#)

[St Francis Memorial Hospital](#)

[St Mary's Medical Center](#)

[UCSF](#)

***What is a HDHP or High Deductible Health Plan?**

Like the name says, this type of plan's deductible is higher than most traditional plans. Your monthly premium payment will be much lower, but you'll have to pay more out-of-pocket until you have met your higher deductible. Also, HDHPs have a higher Out-of-Pocket limit, especially if using an out-of-network provider. They can offer substantial savings if you are in good health and don't use benefits often. Note: HDHPs aren't always the best option for patients, especially those who expect to have significant healthcare expenses in the future. Those patients may be better off with an insurance plan that charges higher premiums upfront but covers a greater percentage of their costs.

Their advantages:

- The number one benefit: cost savings for people who are relatively healthy.
- With an HDHP, you can qualify for a health savings account (HSA) to help cover out-of-pocket expenses. You need to be enrolled in an HDHP to have an HSA.

Anthem's High Deductible Health Plan (HDHP) is the \$2500 Deductible Classic PPO plan.

****What is a Health Savings Account (HSA)?**

A health savings account (HSA) is a tax-advantaged medical savings account available for those who are enrolled in a high-deductible health plan (HDHP). You need to be enrolled in an HDHP to qualify for an HSA. It is a handy way to save for medical expenses and reduce your taxable income. The HSA account is yours forever and is funded by pre-tax dollars through payroll deductions. It is also an investment fund, so it can grow with you even into retirement.

An HSA would be most appealing to an individual or family that has relatively modest medical care expenses, can afford a high-deductible medical plan, and could take advantage of the substantial tax benefits of a health savings account.

For an HSA, you must keep receipts to prove that your withdrawals were used for qualified health expenses.

The Internal Revenue Service sets contribution limits. For 2019, for example, the limit is \$3,500 for individuals and \$7,000 for families, plus an additional \$1,000 "catch-up" contribution for anyone age 55 or older by the end of the tax year.

IMPORTANT NOTES:

- You are not able to have both an HSA and an FSA (Flexible Spending Account) Medical Reimbursement Account. You may, however, have both an HSA and an FSA Dependent Care Account.
- Once you are over age 65 and enrolled in Medicare, you can no longer contribute to an HSA, but you can still use the money for eligible out-of-pocket medical expenses.

Their advantages:

- You can use the funds at any time on eligible medical expenses. This includes deductibles, copays and coinsurance, plus other qualified medical expenses not covered by your plan, as well as dental and vision expenses. Insurance premiums, however, usually cannot be paid for with HSA funds.
- Unlike a Flexible Spending Account, your HSA balance rolls over from year to year, so you never have to worry about losing your savings.
- Portability. The money in your HSA remains available for future qualified medical expenses even if you change health insurance plans, go to work for a different employer, or retire.
- Convenience. Most HSAs issue a debit card, so you can pay for prescription medications and other eligible expenses right away.
- Tax advantages:
 - HSA contributions are pre-tax/tax deductible.
 - The money can be invested in mutual funds, stocks and other investment tools to generate more money.

- The money grows tax-free, which means that you don't pay taxes on the account's growth, and if you make withdrawals for eligible expenses, you don't pay tax on that money either.

Anthem's HSA for Employees

- Anthem's HSA is available with the \$2500 Deductible Classic PPO plan which is their High Deductible Health Plan.
- Anthem's HSA is offered through ActWise using PCN Bank.
- Employee Contributions are made with pre-tax dollars through payroll deductions.
- Employees will be issued a debit card to pay for eligible expenses.
- There is currently no monthly maintenance fee nor minimum balance requirement associated with Anthem's HSA.

What is a Medicare Advantage Plan?

Medicare Advantage (MA) Plans are an "all in one" alternative to Original Medicare. A Medicare Advantage Plan allows you to assign your Medicare Part A, Part B and Part D to a private insurance company. The private insurance company assumes all of the risk for your care and will no longer be billing Medicare as the primary insurer. The private insurance carrier will pay claims directly to the provider.

Anthem's Medicare Advantage Plans

With Anthem Medicare Advantage:

- Only one ID Card (you no longer have to show your Medicare card along with your insurance carrier card) and this one ID Card will be for both your medical and prescription services.
- No more multiple Explanation of Benefits from both Medicare and the insurance company.
- Better overall care through chronic and disease management programs.

Anthem offers two Medicare Advantage Plans:

- Medicare Advantage HMO
 - Anthem's Medicare Advantage HMO is offered at no cost to City retirees.
- Medicare Advantage PPO
 - Anthem's Medicare Advantage PPO is offered at a very low cost to City retirees.

CHOOSING YOUR DOCTOR

How do I Find an Anthem Blue Cross provider?

Anthem is in the process of creating a web site specifically for the City of San Jose. When finding a doctor on the City's microsite, all the City's available plans will be listed. As soon as it is ready, a link will be provided.

In the meantime, you may visit Anthem's main web site: www.anthem.com/ca. Search providers as a GUEST and follow the instructions for each plan- screen shot shown below:

Select a plan/network

What type of care are you searching for?

Medical

 Providers for Behavioral Health & Substance Use Disorder Services are listed under Medical Care.

What state do you want to search in?

California

Select a plan/network

Select HMO

Continue




Not sure which plan or network to search?

We'll ask you a few questions to help you find the right plan or network to search.

Help me select a plan/network?

Search as a member

Identification number or prefix (first three values): 

Enter ID number or prefix

Continue

For the Select HMOs, you will choose **Select HMO** on the drop-down menu
For the Select PPO, you will choose **Select PPO** on the drop-down menu
For the Classic PPO, you will choose **Blue Cross PPO Prudent Buyer**
For the Medicare HMO, you will choose **Senior Secure (HMO)**
For the Medicare Advantage PPO, you will choose **Blue Medicare Advantage (PPO)**

EMERGENCY CARE TRAVELING OUTSIDE OF US

What if I need emergency medical care while traveling outside the county?

Your Anthem plans have coverage for services and supplies furnished in connection only with urgent care or an emergency when travelling outside the United States through [Blue Cross Blue Shield Global Core](http://www.bcbglobalcore.com).

In most cases, members do not have to pay upfront for inpatient care at participating Blue Cross Blue Shield Global Core hospitals, except for the out-of-pocket costs normally paid (non-covered services, deductible, copays, and coinsurance). The participating hospitals are able to submit claims on members' behalf.

To look for participating providers, visit www.bcbglobalcore.com. The Blue Cross Blue Shield Global Core Service Center is available 24 hours a day, seven days a week toll-free at (800) 810- BLUE (2583) or by calling collect at (804) 673-1177. An assistance coordinator, along with a medical professional, will arrange a physician appointment or hospitalization, if needed.

COVERAGE FOR YOUR PRESCRIPTION MEDICATION

What prescription drugs are covered?

View the drugs Anthem covers and learn more about pharmaceutical programs that apply to your coverage, by visiting the pharmacy site at <https://www11.anthem.com/ca/pharmacyinformation/>. From this web site you can search medications by name or can pull up the entire formulary listing in a PDF document. The pharmacy formulary offered to the City of San Jose is the [Essential Drug List 5 Tier](#).

And here's a tip: you will often pay less for generic versions of higher-cost name brand drugs. If you have complex or long-term conditions, you may need “specialty” drugs. Your coverage includes these types of drugs and the support you may need when you take them.

MEMBER ID CARDS

HMO Members:

- All members (employee/retiree & dependents) will be issued ID cards.

PPO Members

- ID cards will be issued for the Subscriber (employee or retiree) and Spouse/Domestic Partner only.
- If an ID card is preferred under the child(ren)'s names, call the customer service number on the back of the Subscriber or Spouse/Domestic Partner's ID card or log in through the member portal and request an ID card with their own name(s).

Medicare Members

- The above ID card distribution will also apply to members who have split family enrollment in Active/Early Retiree plans and Medicare Advantage plans.
- Medicare retirees will receive one ID card that can be used for medical and prescription services.

ADDED BENEFITS

Does my plan have gym membership discounts?

Yes!

- Employees enrolled in the Anthem plans can take advantage of discounted gym memberships through Active&Fit Direct™, offered through American Specialty Health Fitness, Inc. You can choose from 9,000+ participating fitness centers nationwide for \$25 a month (plus a \$25 enrollment fee and applicable taxes).
- Retirees enrolled in the Medicare Advantage PPO or HMO plans will be able to exercise at participating SilverSneakers® Fitness locations at no additional cost.

To find discounts that are available to you, log in to www.anthem.com/ca and select **Discounts**.

What online tools and other services are available?

No matter which plan you choose, you will enjoy the following tools and services that can help you get your health questions answered, find doctors and access care:



LiveHealth Online

When you can't get to the doctor's office, you can have a video visit with a doctor 24/7 using your smartphone, tablet or computer with a webcam. Doctors on LiveHealth Online can talk to you about your health, give you a diagnosis and even a prescription, if you need it.¹ People most often use LiveHealth Online for a cold, the flu, allergies, pink eye and more. There's also LiveHealth Online Psychology, where you can schedule an appointment to see a licensed therapist in 3-4 days. Plus, doctors on LiveHealth Online can talk to you in Spanish.

You'll have a small copay when you visit a LiveHealth Online doctor. It's that simple.



Mobile Health Consumer app

Access tools to keep you connected to important health information 24/7. You can get your mobile ID card, connect with your care team, find urgent care – with directions, and much, much more.

You can use Mobile Health Consumer app from your computer or your mobile device.

- Go to mobilehealthconsumer.com to register and access it from your computer.
- Go to the App Store® or Google Play™ to download the app to your mobile device.



Onsite member advocate

Starting in October, you'll have access to a member advocate right in the heart of City Hall located on the 4th floor in the Human Resources department. The member advocate is an Anthem employee who will be ready to help you find doctors, get a referral and answer questions about your claims. They will also be able to help you with benefit concerns and answer questions to help you get the most of your Anthem benefits and programs.



BlueCard Worldwide®

Getting health care in some parts of the world can be tricky. As an Anthem member you get coverage outside of the U.S. through the BlueCard Worldwide Program. That's right; you'll be able to find doctors and hospitals in nearly 200 countries and territories around the world.

NEED MORE INFORMATION?

There are 4 ways to get the information you need:

1. On-Site Anthem Concierge

Prior to Open Enrollment, which starts on October 21 for employees and November 1 for retirees, you will have access to an Anthem Member Advocate during select times in the Human Resources Department, 4th Floor of City Hall or at the Office of Retirement Services on North First Street.

The Member Advocate is an Anthem employee who will be ready to help you find doctors, help with transition of care, help get a referral and answer questions about your claims. They will also be able to help you with benefit concerns and answer questions to help you get the most out of your Anthem benefits and programs.

2. Call Anthem Membership Services

Anthem will be designating Membership Services phone numbers for City of San Jose employees and retirees. As soon as these numbers are available, they will be posted.

3. Visit City of San Jose's Anthem microsite

Anthem is in the process of creating a web site specifically for the City of San Jose. As soon as this web site is available, a link will be provided.

4. Reach out to City of San Jose:

Human Resources Benefits for employees

- a) Phone: (408) 535-1285
- b) E-mail: HRBenefits@sanjoseca.gov
- c) [HR Benefits web site](#)

Office of Retirement Services for retirees

- a) Phone: (800)732-6477
- b) E-mail: Retirement.Dept@sanjoseca.gov
- c) [Retirement Services web site](#)

When will more information be available?

These FAQs will continually be updated as more information is available. Information will also be posted on the [HR Benefits](#) and [Retirement Services](#) web sites.